

Pricing, Data Analysis and Coding (PDAC)

900 42nd Street South PO 8ox 6757 Fargo, ND 58103-6757

March 13, 2012

OPTEC USA INC ATTN DAN SUAREZ 975 PROGRESS CIRCLE LAWRENCEVILLE GA 30043

Re: Assigned HCPCS Codes for DME Billing

Xref #: 17631921

Product: VENUM TLSO W/DLK

Model numbers: VIPTLDLKSM, VIPTLDLKMD, VIPTLDLKLG, VIPTLDLKXL,

VIPTLDLK2X, VIPTLDLK3X

Dear Mr. Suarez:

The Pricing, Data Analysis, and Coding (PDAC) Contractor provides Healthcare Common Procedural Coding System (HCPCS) assistance to manufacturers to ensure proper coding of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS). The PDAC has reviewed the above listed model numbers. It is our determination that the Medicare HCPCS code to use when billing the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs) is:

L0456 - TLSO, FLEXIBLE, PROVIDES TRUNK SUPPORT, THORACIC REGION, RIGID POSTERIOR PANEL AND SOFT ANTERIOR APRON, EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL PLANE, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISKS, INCLUDES STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT

According to the Article for Spinal Orthoses: TLSO and LSO - Policy Article - Effective July 2010, for an item to be classified as a TLSO the posterior portion of the brace must extend from the sacrococcygeal junction to just inferior to the scapular spine. This excludes elastic or equal shoulder straps or other strapping. The anterior must at a



minimum extend from the symphysis pubis to the xiphoid. Some TLSOs may require the anterior portion to extend up to the sternal notch.

The requested code L0462 requires the anterior panel to extend from the symphysis pubis to the sternal notch. It also requires overlapping plastic in order to provide lateral strength. The anterior panel on the submitted product does not extend from the symphysis pubis to the sternal notch and the plastic panels do not overlap. Therefore, the code assigned best fits the product.

The PDAC provides coding decisions based on the coding guidelines established by the Local Coverage Determination (LCD) and associated policy article developed by the DME MACs. All products submitted to PDAC for a coding verification review are carefully examined by coders and professionals following a formal, standardized process.

This decision applies to the application we received on January 24, 2012. If information submitted in that application has changed or were to change, it could impact our decision. Therefore, a new application would need to be submitted for HCPCS coding verification review. This coding decision will be available within ten (10) working days on the Durable Medical Equipment Coding System (DMECS), which is located on the PDAC web site, www.dmepdac.com. Please take the time to verify that this coding decision is correctly reflected in DMECS.

It is the responsibility of manufacturers and distributors to notify the PDAC immediately of any changes involving their products, related to their current listing on the Product Classification List (PCL) on DMECS. Further information for requesting updates to the PCL can be found on the PDAC website at https://www.dmepdac.com/review/notifying.html.

The assignment of a HCPCS code to these model numbers is not an approval or endorsement of the model numbers by Medicare or Noridian Administrative Services, LLC; nor does it imply or guarantee claim reimbursement or coverage. If you have questions about claim coverage or reimbursement, please contact the DME MAC for your jurisdiction.

If you disagree with this decision, you may request a reconsideration within 45 days of the date of this letter. To request a reconsideration, complete the Reconsideration Request form located on the PDAC web site at

https://www.dmepdac.com/review/requesting.html. If your request for a reconsideration is made after the 45-day time frame, we will treat it as a coding verification review request and require a new application and documentation to support the request. If you have questions about claim coverage or reimbursement, please contact the DME MAC for your jurisdiction. For other questions, contact the PDAC Contact Center at the address listed above or by telephone at (877) 735-1326. The Contact Center is open Monday through Friday from 8:30 a.m. to 4 p.m. CT.

PDAC Noridian Administrative Services, LLC www.dmepdac.com